
**JEFFERSON COUNTY FISCAL COURT
EXPANSION OF OFFENDER SERVICES
LOUISVILLE, KENTUCKY
TI12463**

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PROJECT DESCRIPTION

Cluster Group Affiliation—Criminal Justice

Congressional Districts Served—Kentucky 2nd, 3rd

Purpose, Goals and Objectives—The Turning It Around (TIA) project of the Jefferson County Corrections Department is designed to address the substance abuse treatment needs of African-American and other non-involved fathers who have become involved in the criminal justice system. The overall goal of the project is to enhance current interventions of TIA for court referred non-involved fathers with substance abuse problems. The specific goals of the TIA project are as follows: (1) to assess the extent of substance abuse and related psychosocial problems among the target population; (2) to link substance abusing clients with community services that enhance the substance abuse treatment goals; (3) to provide culturally competent substance abuse treatment to the clients; (4) to offer aftercare treatment groups for men who need additional support in recovery.

Target Population/Geographic Service Area—The target population served by the TIA project in Louisville, Kentucky includes criminal justice referred African American (75 percent) and other (25 percent) fathers. They are in alternative sentencing programs and have conditional release status from Jefferson District Court and Family Court. They have a high arrest history in the past twelve months (77 percent), a high incidence of poverty, and an average educational level attainment of 12 years.

Theoretical Model—The TIA project combines two research-based approaches: (1) strengths based case management, based on the CSAT TIP manual Comprehensive Case Management for substance Abuse Treatment and (2) motivational interviewing based on the client's stage of change. It incorporates culturally competent providers with training in cultural sensitivity and characteristics of African-American families and fatherhood roles. The design includes five research supported components: (1) assessment for client identification; (2) case management; (3) treatment referrals for speciality care; (4) substance abuse treatment; and (5) aftercare. The design also includes an innovative use of fatherhood focused treatment, using approaches that have been incorporated into women's treatment.

Service Providers—The project in the Jefferson County Corrections Department is a partnership between the University of Kentucky Center on Drug and Alcohol Research, the Kentucky Administrative Office of the Court, and the Jefferson county Attorney's Drug Court. The project will also use informal linkages with a number of agencies in the urban area of Jefferson County.

Services Provided—The current TIA program includes discussion groups about male roles, fatherhood roles, positive self-images, STD and HIV prevention, and parenting approaches. Services provided by the expanded TIA program will include case management, treatment referral services including residential, IOP, and outpatient counseling, group and individual counseling; HIV risk reduction education; urine testing; and group and individual aftercare sessions.

Number of Persons Served—The program intends to provide substance abuse assessment for at least 300 court referred clients annually, case management and substance abuse treatment to at least 210 clients annually, and linkages and referrals for at least 100 clients. The program will also provide group aftercare services for up to one year after entering services to at least 50 clients.

Desired Project Outputs—The TIA program anticipates a reduction in the risk of future substance abuse

and an improvement of fatherhood role performance for non-involved fathers in the community . Program staff also anticipate an increased percentage of drug-free urinalyses and higher retention rates among the clients in the TIA program. The Jefferson County Corrections Department believes that the unique design of the TIA program which integrates substance abuse treatment with fatherhood roles will provide a model that will lend itself to replication throughout the field. The unique design of the Ultimately, the project seeks to reduce the negative effects of non-involved fathers on their children.

Consumer Involvement—The program uses client fathers in focus groups to help enhance recovery services and improve the integration of fatherhood roles into service delivery. The evaluator will field test the instruments on the clients to determine appropriateness. Client input on sought after service elements is also taken into consideration by the program staff.

EVALUATION

Strategy and Design—Evaluation will be based on the belief that both process and outcome evaluation are not only necessary for program improvement and outcome assessment, but also for “the transfer of technology”. In as much, the evaluation efforts can be used to promote the program as a model for other programs serving similar populations. The evaluation consists of a process evaluation, an analysis of intake data, and an outcome evaluation.

Evaluation Goals/Desired Results—In addition to the desired project outputs, the evaluation has three overall goals: (1) to conduct an annual process evaluation; (2) to examine intake information to determine what client characteristics are associated with program completion or termination; and (3) to examine short and long term outcomes. In addition, the program anticipates the development of a replicable model and a clinical fatherhood instrument.

Evaluation Questions and Variables—Evaluation questions include “What is the impact and significance of focused substance abuse treatment on clinical outcomes and fathering behavior?” “What are the factors that cause those most at risk of dropping out of the program to do so?” and “Do clients who complete the program actually benefit from the program more than the terminators?” Evaluation process variables include the number of clients receiving treatment, the number of clients receiving case management, extent of contact with social service agencies, faith community, other public and private agencies, law enforcement, courts, and medical facilities and the number of agencies and public officials participating in networking . Evaluation outcome variables include number of early terminations, re-arrests, revocation of probation, child support payment, past month substance use, lifetime use, routes of administration, other non-specified substance abuse related variables, the number of children that a client has, the quantity and qualities of time spent with children, and other non-specified fatherhood variables.

Instruments and Data Management—The Turning It Around program uses the GPRA Core Client Outcomes, the Addiction Severity Index (ASI); and internal risk assessment instrument, and an internal biopsychosocial instrument. The GPRA and ASI will be used at baseline and the two follow-up intervals. Re-arrest, reconviction, and sentencing information will be provided by using Courtnet and Sustain (Kentucky crime data systems). This information will be used at the follow-up periods for comparison. The program will also pilot a fatherhood instrument for substance abusing fathers. In additions, random urine surveillance and group attendance records are conducted to measure program compliance. Baseline interviews will be conducted by the project staff and follow-up interviews will be administered by the University of Kentucky research assistant.

In terms of data management, the evaluation will be conducted by the University of Kentucky, Center on Drug and Alcohol Research. The program will establish it's own management information system and provide baseline information to the evaluator. The evaluation research assistant will be responsible for collecting the follow-up data.

APPROVED FUNDING LEVEL

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